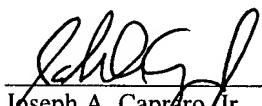
					Complete if Known				
					Application No.		09/955,746		
					Docket No.		AIG-005		
					Filing Date		September 18, 2001		
					First Named Inventor		Robert Parisi		
					Group No.		3626		
Examiner Name		Robert D. Rines							
Confirmation No.		9490							

<b>METHOD OF PAYMENT</b>					<b>FEE CALCULATION (continued)</b>																																																																																							
<input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other					<b>4. ADDITIONAL FEES</b>																																																																																							
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-3081. <input checked="" type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit. <input type="checkbox"/> Applicant claims small entity status. (deduct 50%)					<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Large Entity</th> <th style="width: 15%;">Small Entity</th> <th style="width: 55%;">Fee Description</th> <th style="width: 15%;">Fee Paid</th> </tr> </table>					Large Entity	Small Entity	Fee Description	Fee Paid																																																																															
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Utility	300	500	200																																																																																									
Design	200	100	130																																																																																									
Plant	200	300	160																																																																																									
Reissue	300	500	600																																																																																									
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If the specification and drawing exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																																																																																												
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Patent Administrator Proskauer Rose LLP One International Place Boston, MA 02110 Tel. No.: (617) 526-9600 Fax No.: (617) 526-9899																																																																																												

<b>SIGNATURE BLOCK</b>	
Date: May 2, 2007 Reg. No.: 36,471 Tel. No.: (617) 526-9800 Fax No.: (617) 526-9899	Respectfully submitted,  Joseph A. Capraro, Jr. Attorney for the Applicant Proskauer Rose LLP One International Place Boston, MA 02110-2600